Combined Declaration For Patent Application and Power of Attorney						ATTORNEY DOCKET 83599RLO			
As below named inver	ntor, I hereby decl	are that:					1		
My residence, post office address I believe I am the original, first below) of the subject matter which	and sole inventor	(if only one na	me is lis	ted below) or an original,		ınt ınver	itor (1f plura	l names	are listed
SUPERIMPOSING (GROUND LOCATIO							TIONS (ONTO	•
The specification of which (check	only one item be	low):							
X is attached hereto.									
was filed as United States Application Serial No. on and was amended on (if applicable).									
was filed as PCT interna	•	n Number on a	and was	amended on (if applica	ble).				
I hereby state that I have reviewe	d and understand	the contents of t	he above	-identified specification, in	icluding the	claims, a	as amended l	y any ar	nendment
referred to above. I acknowledge the duty to disclos	se to the U.S. Pate	nt & Trademark	Office a	all information known to n	ne to be mat	erial to p	atentability	as define	ed in Title
37, Code of Federal Regulations,	§1.56.								
I hereby claim foreign priority be accertificate, or (365 (a) of any PCT									
and have also identified below a	ny foreign applica	ations(s) for pate	ent or in	ventor's certificate or any l	PCT interna	tional ap	plication(s)	designati	ng a least
Tone country other than the United	l States of Americ	a filed by me or	the sam	e subject matter having a f	filing date be	efore that	t of the appli	cation(s)	of which
PRIOR FOREIGN/PCT APPLI	CATION(S) ANI	ANY PRIOR	ITY CLA	IMS UNDER 35 U.S.C.	119:				
COUNTRY (if PCT, indicate PCT)	ĀF	PLICATION NUMBER		DATE OF FILING (mntl/dayyear)			PRIORITY CLAIMED U	NDER 35 USC	§119
							YES		NO
		·					YES		NO
nk			·				YES		МО
्राहें Lihereby claim the benefit under	Title 35, United St	ates Code, 119	§(e) of a	ny United States provisiona	al application	n(s) liste	d below:		
PRIOR PROVISIONAL APPL			-						
PROVISIONAL AF	PPLICATION NUMBER				FILING DATE (mo	nth/day/year)			
245									
I hereby claim the benefit under I the United States of America that prior applications(s) in the mann Office all information known to between the filing date of the prior	is/are listed below er provided by the me to be materia	v and, insofar as e first paragraph Il to patentabilit	the subjocent of Title to as defi	ect matter of each of the cl 35, §112, I acknowledge ned in Title 37. Code of	aims of this the duty to Federal Reg	applicati disclose ulations	on is not dis	closed in	that/those
PRIOR US APPLICATIONS C 35USC§120:	R PCT INTERN	ATIONAL APP	PLICATI	ONS DESIGNATING TH	IE U.S FOR	RBENE	FIT UNDER	R	
	U.S. APPL	CATIONS				STA	ATUS (Check o	ne)	
U.S. APPLICATION NUMBER		U.S. FILING DATE			PATENTI	ED	PENDING	ABA	NDONED
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PCT APPLICATIONS DESIGNATING THE U S									
PCT APPLICATION NO PCT FILE		IG DATE		J S SERIAL NUMBERS ASSIGNED (if any)					
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Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY DOCKET		
	83599RLO		
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Se	nd Corresp	ondence to:	Ctoff	Direct Telephone Calls to:
Patent Legal Staff Eastman Kodak Company 343 State Street Rochester, NY 14650-2201				Raymond L. Owens (716) 477-4653 FAX: (716) 477-4646
2	FULL NAME OF INVENTOR	FAMILY NAME Paz-Pujalt	FIRST GIVEN NAME Gustavo	SECOND GIVEN NAME R.
١	RESIDENCE & CITIZENSHIP	CITY Rochester	STATE OR FOREIGN COUNTRY New York 14618 USA	COUNTRY OF CITIZENSHIP USA
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o [RESIDENCE & CITIZENSHIP	Webster	STATE OR FOREIGN COUNTRY New York 14580 USA	COUNTRY OF CITIZENSHIP USA
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2	FULL NAME OF INVENTOR	FAMILY NAME Parkes	FIRST GIVEN NAME David	SECOND GIVEN NAME A.
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
ō	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
4	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2 ::	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
Ď	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	BUSINESS ADDRESS	BUSINESS ADDRESS	СІТҮ	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
ا ه	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
Julia R. Parlyato	Min Montower	Davids tarkes
DATE	DATE	BATE
10/13/01	16/19/61	10/29/01
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE
10/13/01		10/29/01